

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.



□  
D.T. Marshall, Sheriff  
Montgomery County Sheriff Department  
P.O. Box 4219  
Montgomery, AL 36103

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Address different from item 1? ☐ Yes  
delivery address below: ☐ No

3. Service type

☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☒ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article

(Transit)

7005 1820 0002 3461 4056

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1546